

## **AUGUST HEALTH TIP**

This month we are going to cover some basics about bipolar disorder in children and adolescents. Like diabetes or heart disease, bipolar disorder is a long-term illness, which must be carefully managed throughout a person's life. If left untreated, bipolar disorder can result in damaged relationships, poor job or school performance, and even suicide.

Bipolar disorder is a brain disorder that causes people who have it to experience dramatic mood swings. It is more likely to develop among those who have a family history of the disorder. Those with the illness experience mood swings that alternate, or cycle, between periods of “highs” (called mania) and “lows” (called depression), with varying moods in between. Unlike adults whose episodes tend to be clearly defined, children and young adolescents with the illness often experience very rapid swings between depression and mania, many times within a day. Older adolescents may have more classic, adult-type episodes and symptoms.

Some of the commonly reported signs of bipolar disorder among children include:

- Excessively elevated moods alternating with periods of depressed or irritable moods;
- Periods of high, goal-directed activity, and/or physical agitation;
- Racing thoughts and speaking very fast;
- Irregular sleep patterns and/or a decreased need for sleep;
- Severe temper tantrums;
- Excessive involvement in pleasurable activities, daredevil behavior, and/or extravagant, “super-confident” thinking and behaviors;
- Impulsivity and/or distractibility;
- Inappropriate sexual activity, even at very young ages;
- Hallucinations and/or delusions;
- Suicidal thoughts and/or talks of killing self; and
- Inflexible, defiant, and extremely irritable behavior.

It is important to note that diagnosing a child or adolescent with bipolar disorder is approached with a great deal of caution- this is because it can be difficult to distinguish bipolar disorder from other problems that may occur in these age groups. For example, while irritability and aggressiveness can indicate bipolar disorder, they also can be symptoms of attention deficit hyperactivity disorder, conduct disorder, oppositional defiant disorder, or major depression. Drug abuse

and many other environmental factors such as child abuse or exposure to violence may also lead to these symptoms.

For any illness, effective treatment depends on appropriate diagnosis. Children or adolescents with emotional and behavioral symptoms should be carefully evaluated by a mental health professional. Most people with bipolar disorder—even those with the most severe forms—can achieve substantial stabilization of their mood swings and related symptoms with proper treatment. Because bipolar disorder is a chronic illness, long-term preventive treatment is strongly recommended and almost always indicated. A strategy that combines medication and psychosocial treatment is optimal for managing the disorder over time.

In most cases, bipolar disorder is controlled more effectively if treatment is continuous than if it is on and off. However, even when there are no breaks in treatment, mood changes can occur and should be reported immediately to your doctor. The doctor may be able to prevent a full-blown episode by making adjustments to the treatment plan.

As an addition to medication, psychosocial treatments—including certain forms of psychotherapy (or "talk" therapy)—are helpful in providing support, education, and guidance to people with bipolar disorder and their families. Studies have shown that psychosocial interventions can lead to increased mood stability, fewer hospitalizations, and improved functioning in several areas. A licensed psychologist, social worker, or counselor typically provides these therapies and often works together with the psychiatrist to monitor a client's progress. Many people with bipolar disorder also benefit from joining support groups.

Keep in mind that people with bipolar disorder often do not realize how impaired they are, or they may be in denial about having a mental illness. A person who is in the midst of a severe episode may need to be hospitalized for his or her own protection and for much-needed treatment. Some people with Bipolar disorder become suicidal- **any child or adolescent who has suicidal feelings, talks about suicide, or attempts suicide should be taken seriously and should receive immediate help from a mental health specialist or physician. If your regular provider is not available, call 911 or take your child to a hospital emergency room for evaluation.**

The Frederick County Health Department offers psychiatric evaluation and mental health therapy services for adults, adolescents and children- call 301-600-1755 for

more information. Also, the “Health Information & Resources” page of the Health Department’s website offers additional resources about mental illness.

### Resources

Bipolar disorder, National Institute of Mental Health, January, 24, 2007,  
<http://www.nimh.nih.gov/publicat/bipolar.cfm#bp1>

Children’s mental health facts: Bipolar disorder, Substance Abuse and Mental Health Services Administration, November 2005, <http://nmhic-dev.shs.net/publications/allpubs/sma%2D4058/>